2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17171

FILED Jun 19, 2006 Secretary of State

Entity Name: HIGHLANDS LIGHTHOUSE MINISTRIES, INC.

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 120907 P.O. BOX 680307 CLERMONT, FL 34712 P.O. BOX 680307 ORLANDO, FL 32868

Current Mailing Address: New Mailing Address:

P.O. BOX 120907 PO BOX 680307 CLERMONT, FL 34712 ORLANDO, FL 32868

FEI Number: 59-2804639 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

D'ALESIO, REV. JOHN
827 PARK TRAIL DR
CLERMONT, FL 34711 US

D'ALESIO, REV. JOHN
827 PARK TRAIL DR
MINNEOLA, FL 34715 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JOHN N D'ALESIO 06/19/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: DP (X) Change () Addition Name: D'ALESIO, REV. JOHN, Address: 827 PARK TRAIL DR D'ALESIO, REV. JOHN, Address: 827 PARK TRAIL DR

Address: 827 PARK TRAIL DR Address: 827 PARK TRAIL DR
City-St-Zip: CLERMONT, FL City-St-Zip: MINNEOLA, FL 34715 US

Title: DVT () Delete Title: DVT (X) Change () Addition Name: D'ALESIO, MARY JANE, Name: D'ALESIO, MARY JANE,

Address: 827 PARK TRAIL DR Address: 827 PARK TRAIL DR City-St-Zip: CLERMONT, FL City-St-Zip: MINNEOLA, FL 34715

 Title:
 SD
 () Delete
 Title:
 SD
 (X) Change () Addition

 Name:
 STEELE-D'ALESIO, MARJORIE C
 Name:
 STEELE-D'ALESIO, MARJORIE C

Address: 827 PARK TRAIL DR Address: 827 PARK TRAIL DR
City-St-Zip: CLERMONT, FL City-St-Zip: MINNEOLA, FL 34715

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARY JANE D'ALESIO DVT 06/19/2006